

aim and spirit of the author. He says, "the practitioner who would arm his judgment with the knowledge of a broad fact or principle, should not allow his serious attention to be diverted by a pursuit after any useless and trifling details; for not only are they unallied to the stern requirements of surgical skill, but they serve to depose it from the rank and roll of the sciences. Whilst operating for the reduction of inguinal hernia by the taxis or the bistoury, who is there that feels anxiety concerning the origin or the distinctiveness of the "spermatic fascia?" Or, knowing it to be present, who concerns himself about the better propriety of naming it "tunica vaginalis communis," "tunique fibreuse du cordon spermatique," "fascia cremasterica," or "tunica aponeurotica?"

The same subject is continued in the next and last chapter of the present number, which is entitled "the surgical dissection of the first, second, third, and fourth layers of the inguinal region, in connection with those of the thigh;" and the text is accompanied by two excellent plates. The clearness of exposition and the avoidance of all prolix and unnecessary detail which characterize the preceding chapter, equally mark this. It is very well adapted both to serve as a guide to the student in dissecting the parts described, and to refresh the mind of the operator, who is about to attempt the relief of a strangulated hernia; and this, we apprehend, is all that can be desired or expected.

In short, the satisfaction which the perusal of the first part of Mr. Macclise's book afforded us, is renewed in this, both with regard to the drawings and the commentary. And we cannot but feel assured, from these specimens, that the ensuing numbers will prove equally valuable in furnishing a safe and practical treatise on the surgical anatomy of the regions which remain to be described.

F. W. S.

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ART. XIX.—*Essays on the Puerperal Fever, and other Diseases peculiar to Women, selected from the Writings of British Authors previous to the close of the Eighteenth Century, by request of the Sydenham Society.* Edited by FLEETWOOD CHURCHILL, M.D., M. R. I. A., &c. &c. Philadelphia, Lea & Blanchard, 1850: 8vo. pp. 464.

THE present volume comprises the essays of Denman, Hulme, Leake, Charles White, Kirkland, Butter, Joseph and John Clarke, and Gordon on Puerperal Fever; Dr. John Clarke's "Directions for the Management of Pregnancy and Labour, with a View to Prevent Disease"—his remarks on "Retroversion of the Uterus, Milk Fever, Inflammation and Suppuration of the Breasts;" Fothergill on the "Management proper at the Cessation of the Menses;" Macbride's "Cases of Tumefaction of the Labium after Delivery;" Clarke on "Cauliflower Excrescence of the Os Uteri," and his two cases of Tumour of the Uterus, with Dr. Denman's Account of an Excrescence from the Womb.

To these papers Dr. Churchill has appended notes, embodying whatever information has been laid before the profession since their authors' time. He has also prefixed to the essays on puerperal fever, which occupy the larger portion of the volume, an interesting historical sketch of the principal epidemics of that disease.

The whole forms a very valuable collection of papers by professional writers of eminence, on some of the most important accidents to which the puerperal female is liable; and although on most of these we have more recent treatises and monographs, in which the facts recorded by preceding writers have been confirmed and amplified, and many of their errors in pathology and practice pointed out and corrected, still the essays before us are replete with matters calculated to interest and instruct the physicians of the present day. With the opinions and observations which they present, no one should, at least, be ignorant, who would lay claim to the character of a well informed practitioner.

On puerperal fever, a disease with the true pathology and proper treatment—the etiology and prevention—of which we, unfortunately, as yet know but little, if anything, the tracts in the present volume have been selected so as to

give the experience of the writers in particular epidemics, including purposely those whose descriptions and opinions differ, affording thus an excellent practical illustration of the variations presented in the character of the fever in its prevalence at different periods and in distinct localities.

The introductory discourse of Dr. Churchill does not consist of a bare enumeration of the several epidemics of puerperal fever that have been recorded from the earlier periods of medical history to the present time. The accounts of the several occurrences of the disease being accompanied with an interesting abstract of the observations and opinions of the writers from whom those accounts are derived, whenever these observations and opinions are of sufficient importance to merit especial notice, either from the professional standing of the author, their direct bearing upon the pathology and therapeutics of the disease, or its peculiar character in the particular epidemics upon which they are based.

The discourse of Dr. Churchill concludes with some judicious remarks on the pathology of puerperal fever, which he offers "rather as suggestions to induce his readers to follow up the subject, than as absolute inferences."

His first remark is, that some special connection would appear to exist between the epidemics of puerperal fever and lying-in-hospitals. He does not mean exactly to assert that these epidemics always originate with and are kept up by these hospitals; but refers to the fact that we have no record of any epidemic independent of them in early times.

"No doubt the disease has since then been observed in private practice in London, Edinburgh, Sunderland, Leeds, &c. &c., but its extent in these cases is, after all, comparatively limited, except in very sickly times, and it is often confined chiefly to the practice of a few individuals."

"2. Perhaps the most universal fact connected with puerperal fever is the presence of local disease. In almost all cases of the epidemic, where an opportunity of ascertaining has been allowed, local lesions of some kind or other have been found, and even when this opportunity was denied, but little doubt existed in the mind of the practitioner that such existed. It seems very probable that, in many cases where the local disease seemed but slight, there would now be found very serious and important morbid changes; for we know that a patient may die of inflammation of the uterine veins or lymphatics, with very obscure symptoms, and without either enlargement or very obvious tenderness of the uterus, and that these morbid lesions may be overlooked, if the examination be hasty and superficial."

According to Dr. Lee, puerperal fever invariably depends upon some local disease of the uterine organs, attended, in fatal cases, with a disorganization of their different textures. Dr. Churchill formerly entertained a similar view—its correctness he has, however, latterly seen reason to doubt.

"Though," he remarks, "I would wish to express myself cautiously and guardedly, I must honestly avow that, whilst I fully admit the existence of local disease, I do think that epidemic puerperal fever is something more than that, although I may not be able to define what it is."

This supposition is based on several grounds. 1st. The very remarkable variety of opinions as to the nature of the disease—this being hardly reconcilable with the notion of a simple local inflammation. 2dly. The diversity in the prevailing character of different epidemics, and in the plans of treatment recommended for the arrest of the disease; and lastly, if any one will compare a case of simple inflammation of the womb or peritoneum, in childbed, with a case of epidemic puerperal fever, the symptoms and course of the two affections, and the effects of remedies in each, Dr. C. does not think that a doubt will remain upon his mind that, although the latter is a local disease, it is not exclusively so.

After examining the peculiar effects of uterine phlebitis, and showing that it produces a deterioration of the blood, and remarking that the symptoms which Mr. Guthrie describes as characteristic of irritative phlebitis are very like those of puerperal fever, Dr. C. goes on to state that

"Puerperal fever prevails most during the winter or spring months, and in moist and cold weather, or with alternations of cold and warm moist weather." "It may be of importance, therefore, to consider what epidemic diseases are

concurrent at such seasons with puerperal fever. There are three which appear to be so especially: bowel complaints (or gastro-enteritis), typhus fever, and erysipelas. The evidence in support of this statement is so abundant, that to adduce it would be to quote almost every writer on the subject." "Nay, it would appear from the statements of Dr. Labatt and Dr. Collins, that typhus fever, occurring in a patient in a lying-in-ward, is capable of originating puerperal fever. Now, I believe that there is little doubt at present, that in fever the composition of the blood is changed, and that in typhus fever the deterioration has reached its maximum.

"From the concurrence of puerperal fever and erysipelas as an epidemic, it has been asserted by many, and with great probability, that they are essentially the same disease—certainly they prevail during the same atmospheric condition, exhibit often the same general symptoms, and Mr. Nunnally asserts may reproduce each other. Dr. Hutchinson and others have seen the two diseases in the same patients, and I think there is evidence to show that the infants of women attacked by puerperal fever are very liable to attacks of erysipelas or diffuse inflammation.

"Now, one peculiarity of erysipelas, in which Mr. Nunnally states it resembles puerperal fever, is the disposition to the formation of pus in various parts of the body, and he admits the probable consequent deterioration of the blood."

"So far, then, we find that the same seasons give rise to certain diseases (puerperal fever, continued and typhus fever, and erysipelas), that they prevail at the same time epidemically, and, as an epidemic, take on the same type, and appear capable either of giving rise one to the other or of co-existing. Now, perhaps (to use an arithmetical expression), if we could subtract the local peculiarities of puerperal fever from that which it has in common with the others, we should arrive at the object of our search. Can it be that some change in the composition of the blood is this element?"

After noticing the opinions given by various authors in relation to the condition of the blood in puerperal fever, Dr. C. remarks:—

"I should be very sorry to come to any hasty conclusion on so difficult a subject, but it appears possible, at least, that the general element, which constitutes the difference between epidemic puerperal fever and simple inflammation of the uterus and peritoneum, may be some deterioration of the blood, depending either upon atmospheric malaria from without, or absorption of some noxious matter within the body. Whether further researches may prove this to be true or not, I cannot but agree with Mr. Moore that, 'in puerperal fever, as in typhus, cholera, and other epidemic and contagious diseases, which seem properly to belong to the class neuroses, there is, besides that of inflammatory action, another element, unknown, but which has an essential influence upon the intercurrent phlegmasiæ arising in their course, and which may yield at one point only to appear at another.'"

On the important questions, is puerperal fever contagious? and, can it be conveyed by a third party, in health, from a person labouring under it, to another person in childbed? Dr. C., after adducing the opinions of the leading authorities, and some of the more prominent facts having a bearing directly upon the subject, remarks:—

"The evidence and proofs thus adduced are of extreme importance, and I fear we must conclude, however reluctantly, in favour, not merely of the contagiousness of puerperal fever, but of the possibility of its contagion being carried by an intermediate party. This makes the practice of midwifery doubly distressing during the prevalence of an epidemic, and ought deeply to impress us with the necessity of the utmost care and caution."

D. F. C.